

WV JAIL SETTLEMENT ADMINISTRATOR
C/O RUST CONSULTING INC - XXXX
PO BOX XXXX
MINNEAPOLIS, MN 55440

Case 5:22-cv-00405

Document 849-2

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FOR OFFICIAL USE ONLY

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IMPORTANT LEGAL MATERIALS

BARCODE39

- UAA - <<SequenceNo>>

Claimant ID #: <<barcode39>>

<<Name1>>

<<Name2>>

<<Name3>>

<<Name4>>

<<Address1>>

<<Address2>>

<<Address3>>

<<City>> <<State>> <<Zip10>>

<<CountryName>>



DRAFT

CLAIM FORM

If you were an inmate at the Southern Regional Jail in Beaver, West Virginia for more than two days since September 22, 2020, you are eligible for a payment from a settlement with the state of West Virginia. **To participate in this SETTLEMENT, you must submit this claim form by Month XX, 2024.** You can also file your claim online at www.WVjailsettlement.com. Your right to share in the SETTLEMENT FUND will depend solely on the state of West Virginia's records which reflect how long any prisoner was incarcerated. The amount of compensation will depend upon the number of approved claimants filing claims and the number of days you were incarcerated.

Name: _____

Street Address: _____

City/State/Zip Code: _____

Date of Birth: ____/____/____

ANSWER THE FOLLOWING QUESTION

Were you incarcerated at Southern Regional Jail for more than two days since SEPTEMBER 22, 2023?

☐ Yes ☐ No

I declare, under penalty of perjury, that the answer stated above is true and correct.

Signed by: _____

[Signature]

[Date]

TO BE ELIGIBLE TO PARTICIPATE IN THIS SETTLEMENT, RETURN THIS CLAIM FORM TO THE ADDRESS BELOW BY MONTH XX, 2024.

MAIL THE CLAIM TO:

WV Jail Settlement Administrator
c/o Rust Consulting, Inc. - XXXX
PO Box XXXX
Minneapolis, MN 55440

If you want your check sent to a different address than the one above, please indicate that address here: